

# Amended Complaint

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

## UNITED STATES DISTRICT COURT

for the

District of

Division

RECEIVED

DEC 07 2023

U.S. District Court  
Middle District of TN

Case No.

1:23-cv-00024

(to be filled in by the Clerk's Office)

Carlos Farris

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Lt. MADDOX, Lt. Harris Adam  
Trinity Food, Buron

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

MAURY CO. Sheriff's Dept

## COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Carlos Farris

All other names by which  
you have been known:

ID Number

Current Institution

Address

MAURY CO JAIL

1300 LAWSON WHITE DR.

Columbia

TN

38401

City

State

Zip Code

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Lt. MADDOX

Job or Title (*if known*)

MAURY CO Sheriffs Dept

Shield Number

Employer

Address

MAURY CO Sheriffs Dept

1300 LAWSON WHITE DR

Columbia

TN

38401

City

State

Zip Code

☒ Individual capacity☐ Official capacity

Defendant No. 2

Name

Lt. HARRIS

Job or Title (*if known*)

Lieutenant

Shield Number

Employer

Address

MAURY CO Sheriffs Dept

1300 LAWSON WHITE DR

Columbia

TN

38401

City

State

Zip Code

☒ Individual capacity☐ Official capacity



- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

let Appropriate Religious Diet. Lt. MADDOX, LT. HARRIS, AND C/O ALAN BARON  
working AS Correctional officers forced me to have food outside my Religious  
diet set forth by Chaplain Baker whether I Starved or was  
Forced to EAT UNCLEAN FOOD UNWILLINGLY.

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (check all that apply):

- ☒ Pretrial detainee  
☐ Civilly committed detainee  
☐ Immigration detainee  
☐ Convicted and sentenced state prisoner  
☐ Convicted and sentenced federal prisoner  
☐ Other (explain) \_\_\_\_\_

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

C. What date and approximate time did the events giving rise to your claim(s) occur?

See Attached

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

See Attached.

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Emotional Distress  
Stomach Pain, Malnutrition

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Monetary, Punitive, Emotional Damages  
of 50,000.00 or at whatever Amount  
the Court finds Reasonable. Fix Religious  
diet at Maury County Jail.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Mary Co Jail

- B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

- C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☒ Yes

☐ No

☒ Do not know

If yes, which claim(s)?

all claims

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☐ No

- E. If you did file a grievance:

1. Where did you file the grievance?

Kiosk

2. What did you claim in your grievance?

failure to supply religious tray

3. What was the result, if any?

WAS GIVEN homemade Disgusting Bean Patty every day with RAW Veggies

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

Appealed All

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

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2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

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G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

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*(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)*

### VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

- ☐ Yes
- ☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☒ Yes

☐ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s)

Defendant(s)

Trinity Food  
Kenny Smith

2. Court (if federal court, name the district; if state court, name the county and State)

3. Docket or index number

1:23-cv-00024

4. Name of Judge assigned to your case

Judge Holmes

5. Approximate date of filing lawsuit

6. Is the case still pending?

☒ Yes

☐ No

If no, give the approximate date of disposition.

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

to SEND Amended Complaint

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

☐ Yes

☐ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court *(if federal court, name the district; if state court, name the county and State)*

\_\_\_\_\_

3. Docket or index number

\_\_\_\_\_

4. Name of Judge assigned to your case

\_\_\_\_\_

5. Approximate date of filing lawsuit

\_\_\_\_\_

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

\_\_\_\_\_

**IX. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

11/04/2023

Signature of Plaintiff

Carlos M. Farri

Printed Name of Plaintiff

Carlos M. Farri

Prison Identification #

00391233 or 22171

Prison Address

1300 Lawson white dr.Columbia

City

TN 38401

State

Zip Code

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm \_\_\_\_\_

Address \_\_\_\_\_

City

State

Zip Code

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

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U.S. District Court  
Middle District of TN

\* IV.

A. ON or Around Feb. I REQUESTED

B. FOR A Religious Diet through  
Chaplain Baker. Chaplain Baker  
is Responsible for Religious Diets  
e Maury Co JAIL.

ON or Around March AS A form  
Retaliation AND Cruel AND  
Unusual Punishment AFTER I  
filed Numerous Grievances ABOUT  
my Religious Diet to Lt. MADDOX  
AND Lt. HAZEL (who ARE over  
Operations AND Trinity Food who  
are employed by these officers)

ON MARCH 7th they  
feed me UNCLEAN AND UNHEALTHY  
meat that went AGAINST  
my Religious LAW OF THE Gnostic  
Hebrew located in the King  
James Bible in Chapter 1  
Verse 29 of Genesis. Which consist  
of fruit, vegetables, AND FISH ONLY.

See Also The Book of Jubilees.  
After 40 days of Starving And  
MAINUTRITION. LT. HARRIS finally  
got the kitchen (Trinity food)  
Kacey AND Scott whom to  
JAN Will not give me their  
last NAMES to serve A  
Gnostic Hebrew Diet. As ANOTHER  
form of Retaliation AND Cruel  
AND UNUSUAL Punishment For  
Requesting A Religious tray  
Lt. MADDOX, Chaplain Baker  
AND Trinity Food Employers Kacey  
AND Scott force me to eat  
the same tray every day.  
(BEAN PATTY, 2 SLICES of White  
bread, 1 Slice of RAW Veggies  
Carrots or Corn.) Since March to Now

(H. Maddox #1) C/O  
ON MARCH 17<sup>th</sup> 2023 C/O BAILLY/C  
TOLD ME they found out the  
food that they fed me contained  
meat (turkey) AND WAS NOT  
SOY meat. After this incident I  
was sick for weeks AND WAS  
SEEN BY the nurse VANESSA.

ON or AROUND March I've  
filed numerous grievances for  
NOT being Allowed to have  
A prayer Rug, Prayer Oil  
OR Being Able to Exercise  
my Religion. I've Suffered  
Emotionally & Physically Mentally  
AND Spiritually.

LT. MADDOX HAS Denied  
me these Rights. AND  
Chaplain David Baker because  
they go Against their Christian  
Beliefs.

ON 11-20-23 many Co Jail  
As A form of punishment  
are giving me my mail  
late. Violating my Rights.

- ON or Around March I was  
Denied Hot meals all thru  
March And April due to kitchen  
construction. Lt. Maddox ordered these  
hot meals or failed to provide them.

Carlos M. Farris  
#391233  
Maury County Jail  
1300 Lawson White Dr.  
Columbia, TN 38401

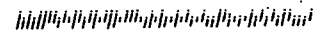
NECPOST  
11/20/2023  
POSTAGE \$001.83  
ZIP 37203  
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U.S. District Court  
Middle District of TN

Clerk, U.S. District Court  
middle District of TN  
719 Church Street, Suite 1300  
Nashville TN 37203  
Official Business



Legal